



Effective on 12/08/2004  
as pursuant to the Consolidated Appropriations Act, 2005 (H.R. 4818)

# FEE TRANSMITTAL for FY 2005

## Complete if Known

Application Number **09/380,825**  
Filing Date **05/04/2004**  
First Named Inventor **Scott M. Herbig**  
Examiner Name **UNKNOWN**

☐ Applicant claims small status. See 37 CFR 1.27

Art Unit **UNKNOWN**

Total Amount of Payment (\$) **1500.00**

Attorney Docket No. **PC9835B**

## METHOD OF PAYMENT (check all that apply)

- ☒ Check ☐ Credit Card ☐ Money Order ☐ None ☐ Other (please identify): \_\_\_\_\_
- ☒ Deposit Account: Deposit Account number **16-1445** Deposit Account Name **Pfizer Inc**  
For the above identified deposit account, the Director is authorized to: (check all that apply)
- ☒ Charge fee(s) indicated below ☐ Charge fee(s) indicated below, except for the filing fee to the above-identified deposit account.
- ☒ Charge any additional fee(s) or any underpayment of fee(s) under 37 CFR 1.1.6 and 1.17 ☒ Credit any overpayments

**WARNING:** Information on this form may become public. Credit card information should not be included on this form. Provide credit card information and authorization on PTO-2038

## FEE CALCULATION

### 1. BASIC FILING FEE

Application Type	FILING FEES		SEARCH FEES		EXAMINATION FEES		Fees paid
	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	Fee (\$)	Small Entity Fee (\$)	
Utility	300	150	500	250	200	100	
Design	200	100	100	50	130	65	
Plant	200	100	300	150	160	80	
Reissue	300	150	500	250	600	300	
Provisional	200	100	0	0	0	0	

### 2. EXCESS CLAIM FEES

Fee Description	Fee (\$)	Small Entity Fee (\$)
Each claim over 20 (including Reissues)	50	25
Each independent claim over 3 (including Reissues)	200	100
Multiple dependent claims	360	180
Total Claims		
- 20 or HP= _____ x _____ = _____	Fee (\$)	Fee Paid (\$)
HP= highest number of total claims paid for, if greater than 20		

Indep. Claims	- 3 or HP= _____ x _____ = _____	Fee (\$)	Fee Paid (\$)
HP= highest number of total claims paid for, if greater than 3			

### 3. APPLICATION SIZE FEE

If the specification and drawings exceed 100 sheets of paper, (excluding electronically filed sequence or computer listings under 37 CFR 1.52(e)), the application size fee due is \$250 (\$125 for small entity) for each additional 50 sheets or fraction thereof. See 35 U.S.C. 41(a)(1)(G) and 37 CFR 1.16(s).

Total Sheets	Extra Sheets	Number of each additional 50 or fraction thereof	Fee (\$)	Fee Paid (\$)
- 100= _____	/50= _____	(round up to a whole number) x _____		

### 4. OTHER FEE(S)

Non-English Specification, \$130 fee (no small entity discount)

Other : \_\_\_\_\_

Fees Paid (\$)

### Submitted

Name (Printed/Type) **Andrea E. Dorigo** Registration No. **47,532** Telephone **1-212-1898**  
(Attorney Agent)

Signature \_\_\_\_\_

This collection of information is required by 37 CFR 1.17 and 1.27. The information is required to obtain or retain a benefit by the public which is to file (and by the USPTO to process) an application. Confidentiality is governed by 35 U.S.C. 122 and 37 CFR 1.14. This collection is estimated to take 12 minutes to complete, including gathering, preparing, and submitting the completed application form to the USPTO. Time will vary depending upon the individual case. Any comments on the amount of time you require to complete this form and/or suggestions for reducing this burden, should be sent to the Chief Information Officer, U.S. Patent and Trademark Office, U.S. Department of Commerce, P.O. Box 1450, Alexandria, VA 22313-1450. DO NOT SEND FEES OR COMPLETED FORMS TO THIS ADDRESS.

SEND TO: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450.

If you need assistance in completing the form, call 1-800-pto-9199 and select option 2.